## UNITED STATES DISTRICT COURT

for the

Northern 1	District	of	Georgia
------------	----------	----	---------

		)		
JANE DOE		)		
Plaintiff(s)		)		
v.		) Civil A	ction No.	1:23-cv-05578-MLB
GEORGIA DEPARTMENT C CORRECTIONS, ET AL.		) ) )		
Defendant(s)		)		
	SUMMONS IN	A CIVIL ACT	'ION	

To: (Defendant's name and address)

Rhonda Billings MHM / Centurion Health 1745 Phoenix Blvd., Suite 240 Atlanta, Georgia 30349

A lawsuit has been filed against you.

Within 21 days after service of this summons on you (not counting the day you received it) — or 60 days if you are the United States or a United States agency, or an officer or employee of the United States described in Fed. R. Civ. P. 12 (a)(2) or (3) — you must serve on the plaintiff an answer to the attached complaint or a motion under Rule 12 of the Federal Rules of Civil Procedure. The answer or motion must be served on the plaintiff or plaintiff's attorney, whose name and address are:

David J. Utter THE CLAIBORNE FIRM, P.C. 410 East Bay Street Savannah, Georgia 31401 david@claibornefirm.com

If you fail to respond, judgment by default will be entered against you for the relief demanded in the complaint. You also must file your answer or motion with the court.

	CLERK OF COURT			
Date:				
	Signature of Clerk or Deputy Clerk			

CLEDY OF COURT

AO 440 (Rev. 06/12) Summons in a Civil Action (Page 2)

Civil Action No. 1:23-cv-05578-MLB

## PROOF OF SERVICE

(This section should not be filed with the court unless required by Fed. R. Civ. P. 4 (l))

	This summons for (nan	ne of individual and title, if ar	ny)					
was red	ceived by me on (date)		·					
	☐ I personally served	the summons on the ind	lividual at (place)					
			on (date)	; or				
	☐ I left the summons at the individual's residence or usual place of abode with (name)							
		,	a person of suitable age and discretion who res	sides there,				
	on (date), and mailed a copy to the individual's last known address; or							
	☐ I served the summo	ons on (name of individual)		, who is				
	designated by law to a	accept service of process	s on behalf of (name of organization)					
			on (date)	; or				
	☐ I returned the summons unexecuted because							
	☐ Other ( <i>specify</i> ):							
	My fees are \$	for travel and \$	for services, for a total of \$	0.00				
	I declare under penalty of perjury that this information is true.							
Date:		_						
	Server's signature							
		Printed name and title						
		_	Server's address					

Additional information regarding attempted service, etc: